GOVERNMENT OF INDIA
HEALTH AND FAMILY WELFARE
LOK SABHA

UNSTARRED QUESTION NO:749
ANSWERED ON:29.02.2000
CASES OF MALARIA IN TRIBAL BACKWARD AREAS
HARIBHAU MAHALE

Will the Minister of HEALTH AND FAMILY WELFARE be pleased to state:

(a) whether cases of malaria are on the rise in the country;

(b) if so, the number of malaria cases detected during the first quarter of the current year, State-wise;

(c) whether all the steps taken to eradicate malaria are inadequate;

(d) if not, the reasons for spreading malaria;

(e) whether more cases of malaria are detected in tribal areas than other parts of the country;

(f) if so, the reasons therefor;
(g) whether the Government have formulated a separate action plan to eradicate malaria from the tribal/backward areas of the country;
(h) if so, the details thereof; and
(i) the steps proposed to be taken for the eradication of malaria in the country?

Answer

THE MINISTER OF STATE IN THE MINISTRY OF HEALTH AND FAMILY WELFARE (INDEPENDENT CHARGE) (SH SHANMUGAM)

(a) to (d): The incidence of malaria in the country as a whole in 1999 has been lower than that in the previous year. However, focal outbreaks of this disease did occur in Assam, Bihar, Mizoram, Nagaland and West Bengal. Special teams were sent to Assam,Bihar and West Bengal to advise to local administation on the preventive steps to be taken.

(e) & (f): Yes, Sir. The tribal areas are highly endemic to Malaria due to the following reasons:-

(1) The more potent Malaria vectors which are able to transmit the disease even in Low density conditions are predominant in the tribal areas.

(2) Most of these tribal belts are located in forests, forest fringes and inaccessible Areas where the situtation is conducive for mosquito breeding and transmission of Malaria throughout the year.

(3) The social and culture habits of tribals also contribute to Malaria problem in these Areas.

(g) to (i): Under the National Anti-Malaria Programme (NAMP), an Enhanced Malaria Control Project (EMCP) with World Bank support, essentially covering 1000 predominantly tribal highly malaria-endemic districts of 7 peninsular States, namely Andhra Pradesh, Bihar, Orissa, Gujarat, Maharashtra, Madhya Pradesh and Rajasthan and 19 cities/towns (having high endemicity of Malaria in these States and in the State of Karnataka, Tamil Nadu & West Bengal) is being implemented since September, 1997. This Project aims at intensifying malaria control activities by way of additional inputs through a mix of interventions as under:-

- Early case Detection and Prompt Treatment (EDPT) through use of newer drugs and Rapid Diagnostic Kits.

- Selective Vector Control including use of Synthetic Prethroids in rural areas and Biolarvicides in urban areas.

- Promotion of personal protection methods by use of Medicated Mosquito Nets (MMNs).

- Early detection and containment of epidemics.

- Information, Education and Communication towards personal prevention and Community participation.

- Institutional and Management capacity building, manpower development Through intensive re-orientation training programmes at all levels and Efficient Management Information System (MIS).